



20 AUG -3 PM 3: 19

This entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation DO NOT LEAVE ANY RESPONSE SPACES BLANK If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST provided UPON FILING. THIS WORKSHEET WILL BE A PUBLIC RECORD.

Candidate Information	1	Candidate Name: TEFFREN HAPLAN Gender (optional, for translation use only) MALE Office: COSTA MESA CITY COUNCIL DEPLOY GENAIL. HAPLAN 4 COSTAMESA & GMAIL, CON Home Address 2552 FAIRWAY DHVE, COSTA MESA, CA 92627 Mailing Address: P.O. BOX 11323 COSTA MESA, CA 92627 Business Address: NA Phone Number(s) Business: NA Home/Mobile 949.335.2904 Fax NA
Attorney Information	2	Attorney Name (or other person authorized to act on your behalf). Address Phone Number(s) Business Mobile: Fax Fax

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office

Proposed	
Ballot	
Designation(s)	

Proposed Ballot Designation(s).

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Alternate Ballot Designation(s) 1

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Alternate Ballot Designation(s) 2

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In the spaces provided on the next page(s):

3

- (a) Describe why you believe you are entitled to use the proposed ballot designation
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. Do not submit originals

It is your responsibility to justify your proposed ballot designation and to provide all requested details.

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.



If your proposed ballot designation contains one or more slashes ("/") separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.

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Justification for use of Proposed Ballot Designation(s) if you are proposing alternate ballot designations, please provide justification for use of those on Page 3.	4	Employer Name or Business: Person who can verify this information: Name: ELLIA THOMPSON Phone Number(s): Justification for use of 2nd PVO: I CURRENTLY STAN A VICE COSTA MESA PLANNIK COMM Current or most recent job title: PLANNIK COMM Employer Name or Business: CITY of COSTA	WIEL S JESSUP 310.281.62 CHAIR OF ISSIDADE S MESA 714.784.5	Start/End Dates:	ETKOMPSEN TY OF 2/2017-1	PROSOF PROSOF PROSOF PROSOC CAL, GOV
Refere signing	halow	Name: Phone Number(s) y, answer/initial the following questions. Does your propose		Email:		
1) Use onl 2) Non-jud 3) Use mo 4) Sugges 5) Refer to 6) Abbrevi 7) Place th 8) Use an 9) Use the 10) Use the	y a porticial car re than t an eva a statu ate the word or word or mame (name (a racia) any ac	tion of the title of your current elected office? Indidates: Use only the word "Incumbent" for an elective office to which three total words for your principal professions, vocations, or occupal aluation of you, such as outstanding, leading, expert, virtuous, or emirus (Veteran, Activist, Founder, Scholar), rather than a profession, vocaword "retired? "retired" after the words it modifies? Example: Accountant, retired reprefix (except "retired") such as "former" or "ex-" to refer to a former retired" along with a current profession, vocation, or occupation? Example a political party or political body? It, religious, or ethnic group? It would be the sequestions is "yes," your properties."	n you were appointed ions? ent? ation, or occupations profession, vocation, nple: Retired Firefigi	d? ? , or occupation? hter/Teacher	□Yes No	Initial Initia
х	77	Candidate's Signature	Date Signed:	8 /	3 / 2	Vear



COMPLETE THIS	PAGE	UNLY IF one or more Alternate Ballot Designation(s) are provided. If this page is not applicable, please initial:
Justification for Alternate Ballot Designation(s) 1	A	Justification for use of 1st PVO: The Apropagate Approach approac
		Current or most recent job title: Employer Name or Business: Person who can verify this information: Name: Phone Number(s): Email: Justification for use of 1st PVO:
Justification for Alternate Ballot Designation(s) 2	В	Current or most recent job title: ATTOMACY AND ACTIVE MERGIC of THE CALIFORNIA SPATE MEDICAL PROPERTY OF CONTROL OF CONTROL STATUEND Dates: 10 MB - INSTANCE OF THE CONTROL OF C